

Child and Adolescent Mental Health Division

## Referral Acceptance Form

**Instructions: Boxes 1 through 12 are to be filled out by the Family Guidance Center (FGC) Mental Health Care Coordinator (MHCC).**

[1] Youth Name:	[2] Youth Registration Number:	[3] LOC Requested
[4] FGC		[5] FGC MHCC
[6] FGC Phone Number	[7] FGC Fax Number	[8] Date Referral Sent to Agency
[9] Provider Agency		[10] Provider Agency Contact Person
[11] Agency Phone Number		[12] Agency Fax Number

**Instructions: Boxes 13 through 18 are to be filled out by the Provider Agency and returned to the FGC within two (2) working days of receipt of the referral packet.**

[13] Signature of Agency Contact Person	[14] Printed Name of Agency Contact Person
[15] Date Referral Packet Received	[16] Date Referral Accepted
[17] Anticipated Admit or Service Date	[18] Date Waitlisted (for out-of-home providers only and if no beds are available)

Should your agency decide to reject this referral for any reason, please indicate such by completing the following **required** steps within two (2) working days of receipt of the referral packet from the FGC:

- [1] Indicate by checking the box below if your agency is rejecting the referral.
- [2] Have agency Clinical Director print his/her name, and [3] sign form below.
- [4] Provide a written justification of the rejection signed by your Clinical Director and attach to this Referral Acceptance Form.
- [5] Fax this form and justification to the attention of the **FGC Chief through the above named FGC MHCC within two (2) working days** of receipt of the referral packet.

PLEASE NOTE: The above five (5) steps must be completed if the agency rejects a referral. Please contact the FGC MHCC assigned to the referral to discuss any delays in returning this form within the two (2) working days as required.

[19] REFERRAL REJECTED ☐

[20] Print Name of Agency Clinical Director		[21] Signature of Agency Clinical Director	
[22] Signed Justification Attached <input type="checkbox"/>	[23] Date:	[24] Fax Referral Form <input type="checkbox"/>	